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**JOHNSON & JOHNSON
PATENT LAW DEPARTMENT
OFFICE OF GENERAL COUNSEL**
The R.W. Johnson Pharmaceutical Research Institute
3210 Merryfield Row, San Diego, CA

FACSIMILE TRANSMISSION COVERSHEET

DATE: November 21, 2000

TO: Mary Anne Debrino
Examiner

COMPANY: U.S. Patent & Trademarks Office

FACSIMILE NO.: (703) 305-7401

FROM: John W. Wallen

TELEPHONE NO.: (858) 784-3239

FACSIMILE NO.: (858) 450-2002
or: (858) 450-2078

NUMBER OF PAGES INCLUDING THIS COVER SHEET: 3

COMMENTS: Ms. Debrino, attached is the divisional application for ort1060,
Serial No. 09/434,965 requesting the cancellation of Claims
1-15, 19-26. See Section 17.

(IF THERE IS A PROBLEM WITH THIS TRANSMISSION PLEASE CALL (858) 784-3249)

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UTILITY PATENT APPLICATION TRANSMITTAL

(only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

ORT-1060

First Named Inventor or Application Identifier

Alain T. Luxembourg et al

Express Mail Label No.

EM372325747US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (attached hereto in duplicate)
2. ☒ Specification [Total Pages 30]
(Preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. ☒ Drawing(s) (35 USC 113) [Total Sheets 29]
4. Oath or Declaration
 - a. ☐ Newly executed (original or copy)
 - b. ☐ Unexecuted original
 - c. ☒ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional check boxes 5 and 16)
 - i. ☐ Deletion of Inventor(s)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
5. ☒ Incorporation by Reference
(useable if Box 4c is checked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6. ☐ Microfiche Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Copy
 - b. ☐ Paper Copy (identical to computer copy)
 - c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

8. ☐ Assignment Papers (cover sheet & document(s))
9. ☐ 37 CFR 3.73(b) Statement
(when there is an assignee) ☐ Power of Attorney
10. ☐ English Translation Document (if applicable)
11. ☐ Information Disclosure Statement
(IDS/PTO-1449 ☐ Copies of IDS Citations)
12. ☐ Preliminary Amendment
13. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)

15. ☒ Other: Express Mail Certificate
EM372325747US

16. ☒ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:
Amend the specification by inserting before the first line: - This is a ☐ Continuation ☐ Divisional
☐ Continuation-in-Part (CIP) of prior application No.: 08/909549, filed 12 Aug 1997. --
17. For this divisional application, please cancel original Claims 1-15, 19-26 of the prior application before calculating the filing fee.

18. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Labelor ☒ Correspondence Address below

Name: Audley A. Clamperero, Jr., Esq.
Address: Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003 USA

19. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to John W. Wallen, III at:
Telephone: (732) 524-2806 Fax: (732) 524-2808

19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME

John W. Wallen, III

Reg. No. 35403

SIGNATURE

DATE

November 5, 1999

FEE TRANSMITTAL	<i>Complete if Known</i>	
	Application Number	
	Filing Date	November 5, 1999
	First Named Inventor	Alain T. Luxembourg et al.
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	ORT-1060

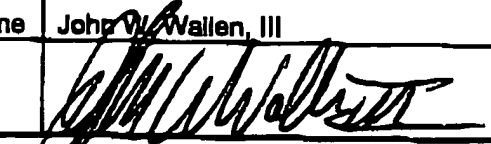
FEE CALCULATION**CLAIMS AS FILED**

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$760.00
TOTAL CLAIMS	3 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x 78.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$260.00	
			TOTAL FEES	\$ 760.00

METHOD OF PAYMENT

☒ Please charge Deposit Account No. 10-0750/ORT-106/JWW in the amount of \$760.00.
Three copies of this sheet are enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/ORT-1060/JWW. Three copies of this sheet are enclosed.

SUBMITTED BY:		<i>Complete (if applicable)</i>
Typed or Printed Name	John V. Wallen, III	Reg. No. 35,403
Signature		Deposit Account No. 10-0750
	Date: November 5, 1999	

*** RX REPORT ***

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